

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	SA	E8966	10-19-00

# INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
= ..... Allowed                        I ..... Interference  
- (Through numeral)..... Canceled    A ..... Appeal  
+ ..... Restricted                        O ..... Objected

Claim	Date
Final	
Original	
1	12/20/01
2	1/10/02
3	2/14/02
4	2/14/02
5	2/14/02
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Claim	Date
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If more than 150 claims or 10 actions  
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